

07-247

AO 240 (DELAWARE REV 7/00)

UNITED STATES DISTRICT COURT
DISTRICT OF DELAWAREPlaintiff DORIAN WAINERAPPLICATION TO PROCEED
WITHOUT PREPAYMENT OF
FEES AND AFFIDAVIT

V. /

Defendant(s) DIRECTOR MRS HERR
OF CREST PROGRAM

CASE NUMBER:

I, DORIAN WAINER

declare that I am the (check appropriate box)

☐ Petitioner/Plaintiff/Movant ☒ Other in the above-entitled proceeding; that in support of my request to proceed without prepayment of fees or costs under 28 USC §1915, I declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief sought in the complaint/petition/motion.

In support of this application, I answer the following questions under penalty of perjury:

- 07-247 -

1. Are you currently incarcerated? ☒ Yes ☐ No (If "No" go to Question 2)

If "YES" state the place of your incarceration

Are you employed at the institution? ☐ Yes ☒ NoDo you receive any payment from the institution? ☐ Yes ☒ No

Have the institution fill out the certificate portion of this affidavit and attach a ledger sheet from the institution(s) of your incarceration showing at least the past SIX months' transactions. Ledger sheets are not required for cases filed pursuant to 28:USC §2254.

2. Are you currently employed? ☐ Yes ☒ No

a. If the answer is "YES" state the amount of your take-home salary or wages and pay period and give the name and address of your employer.

b. If the answer is "NO" state the date of your last employment, the amount of your take-home salary or wages and pay period and the name and address of your last employer.

3. In the past 12 twelve months have you received any money from any of the following sources?

- | | | |
|----|--|---|
| a. | Business, profession or other self-employment | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| b. | Rent payments, interest or dividends | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| c. | Pensions, annuities or life insurance payments | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| d. | Disability or workers compensation payments | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| e. | Gifts or inheritances | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| f. | Any other sources | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |

If the answer to any of the above is "YES" describe each source of money and state the amount received AND what you expect you will continue to receive.

My Professional retired Parents have agreed to help me pay filing fees until my release I will receive from both parents I will pay partial amounts until filing fees are rendered



Note Court my entire incarceration monthly I will receive 50 dollars a month being able to pay \$10 dollars a month

4. Do you have any cash or checking or savings accounts? ☐ Yes ☒ No

If "Yes" state the total amount \$ _____

5. Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles or other valuable property? ☐ Yes ☒ No

If "Yes" describe the property and state its value.

6. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support, OR state *NONE* if applicable.

I declare under penalty of perjury that the above information is true and correct.

Date: April 30, 2007

Signature of Applicant Dorian Blauer

Court forma Pauperis is enclosed But the Plaintiff which not to proceed this way of filing fees but to enclosed legal affidavit

**SEE ATTACHED
SIX MONTH STATEMENT**

IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF DELAWARE

DORIAN WAINER

Plaintiff/s

V.

Director Merr

Defendant/s

Civil Action #: 42 U.S.C. § 1983

STATE OF DELAWARE
COUNTY OF New Castle

AFFIDAVIT

I, DORIAN WAINER, being duly sworn, deposes and says:

United State District Court through this
legal affidavit I would like to proceed
with filing fee's be committed by myself
I have found definite assets. My father and
Mother have agreed to help me pay filing
fees completely until payment is rendered
at small amounts each month

Dorian Wainer

Sussex Correctional Institution
P.O. Box 500
Georgetown, DE 19947

Subscribed and sworn before me this 3rd day of May, 2000. 2007

Judith Ann Lederman

DATE: *Spring 2000* BLDG. *403*
SUSSEX CORRECTIONAL INSTITUTION
P.O. BOX 500
GEORGETOWN, DELAWARE 19947

Central
Federal
State

Peter J. Dallen, U.S. District Court
Office of United State Clerk
844 W. K. King Street, Suite 18
Wilmington, Delaware
19801-3576

19801-3576



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Printed: 4/13/2007

Page 1 of 1

Average Daily Balance For Pauper Filing
For Days the Individual was in Residence at SCI from 3/26/2007 through 4/13/2007

SBI: 00474316**NAME: WAINER, DORIAN D**

<i>Date</i>	<i>Balance</i>
03/26/2007	\$0.00
03/27/2007	\$0.00
03/28/2007	\$0.00
03/29/2007	\$0.00
03/30/2007	\$53.06
03/31/2007	\$53.06
04/01/2007	\$53.06
04/02/2007	\$53.06
04/03/2007	\$53.06
04/04/2007	\$29.31
04/05/2007	\$29.31
04/06/2007	\$29.31
04/07/2007	\$29.31
04/08/2007	\$29.31
04/09/2007	\$149.31
04/10/2007	\$149.31
04/11/2007	\$145.77
04/12/2007	\$195.77
04/13/2007	\$135.77

Summary for 'SBI' = 00474316 (19 detail records)

Average Daily Balance: \$62.51

- 0 7 - 2 4 7 -



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Peter J. Dallen U.S. District Court
Office of United State Clerk
844 N. K. Bay Boulevard
Wilmington, Delaware 19801-3576

C. J. Dallen
United States
District Court
Wilmington, Delaware

Spring Garden Bldg. HHS
EX CORRECTIONAL INSTITUTION
BOX 500
DOVER, DELAWARE 19947